

No 8
55 South 7th St

5.
Published March 5th
1828

An Inaugural Essay

on

Silholotomy

for

The degree of Doctor of Medicine

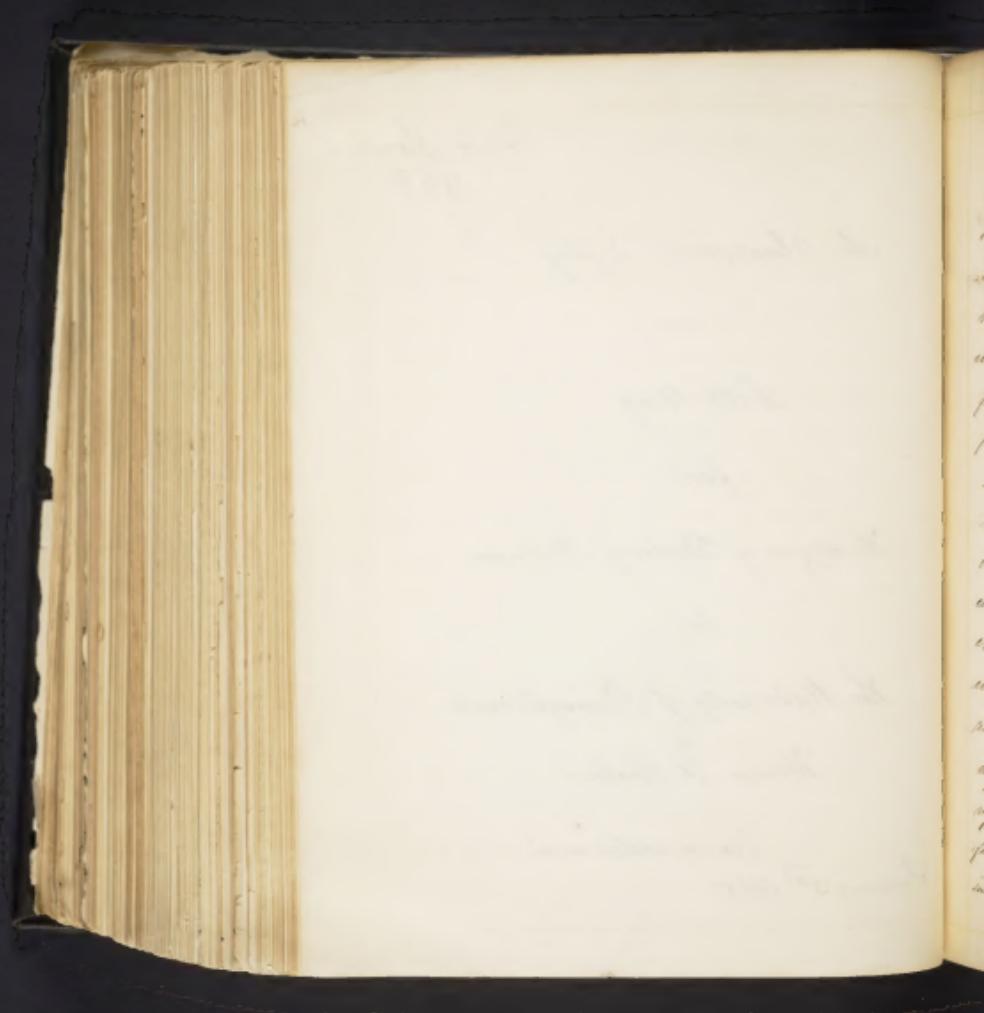
in

The University of Pennsylvania

by
Thomas J. Herbert

"Vix ea nostra voco"

January 3rd 1828



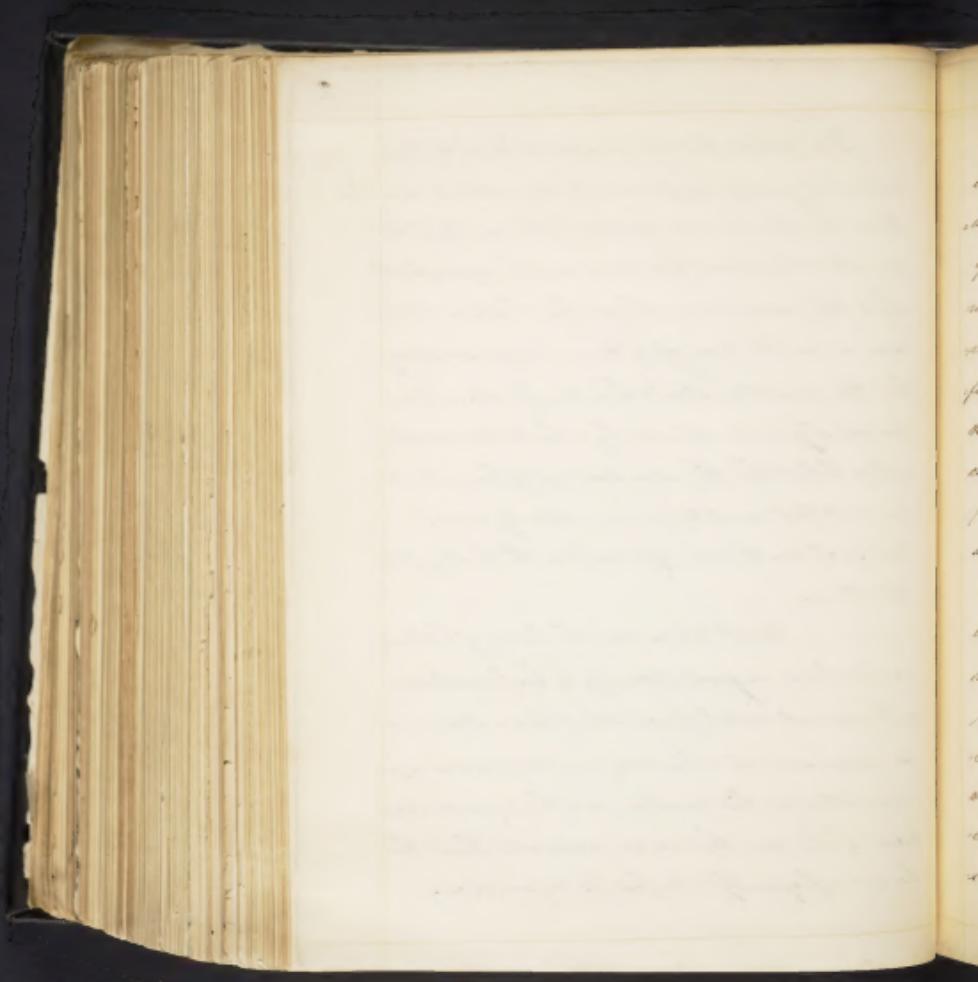
In the infancy of our science, the study of human anatomy was rendered almost impracticable by the customs or the superstition of the age. Our professors were therefore obliged to content themselves with vague conjectures founded on the dissection of inferior animals. Bearing this in mind, we are less surprised at the slow progress of our fathers toward the perfection of operations surgery.

In the whole range of operations there is none which requires of the surgeon more correct knowledge of anatomy, than lithotomy. So deeply was this operation imbibed with the danger attendant on this operation, that he exacted from his pupils an oath that they would never attempt to perform it. He was well aware of the ignorance, which then, prevailed with respect to the anatomy of the perineum and contents of the pelvis, and rightly conceived, that by a rash and unskillful interference, that termination would be hastened, which in the usual course of events, might be long delayed.



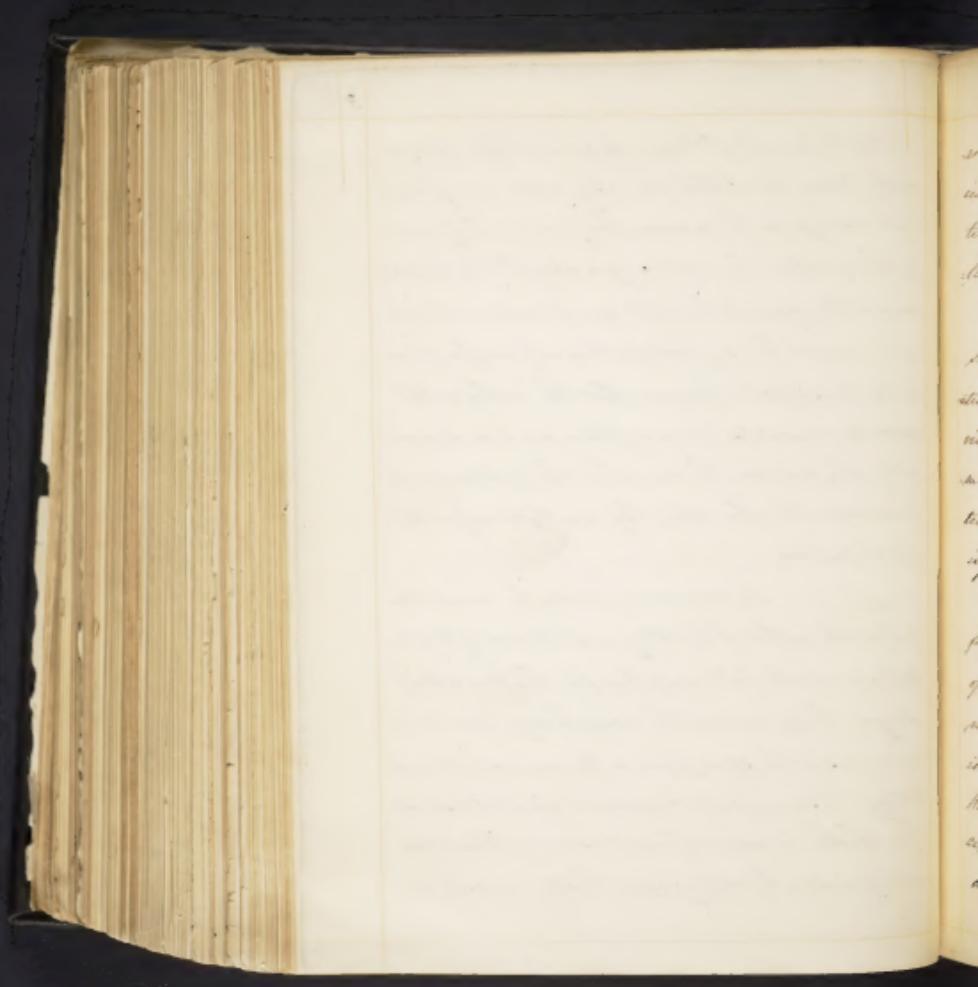
It is probable, that the immediate agents of Applegates religiously complied with their oaths. However, from the opportunities afforded by the variety of anti-slave laws, to be relieved from punishment, and the temptation with which they resort to any thing which holds out to them even a remote prospect of ease; it is not surprising that the operation should have been practised by men desirous of gain, or deluded by a heated imagination into a belief that they were destined by heaven to us, one whitbed mortal from an authority grave. That such was the case, appears from the history of the operation.

Until Col. C. wrote the history of Libberty, was involved in great obscurity; he has furnished us with a minute detail of each step of the operation; and so circumstantial is his account of the winter and spring following this operation, and the regular management of the case, that we are inclined to think that he, not unfrequently anticipated its consequence.



Till the period of Penny, surgeons operated as direct-
ed by Celsius; about that time they made a very impor-
tant change in the manner, though not in the time of
the operation; by substituting a straight lateral inci-
sion for the original transverse one: the value of this al-
teration, must be very evident; it is only necessary to re-
fer to the subject to perceive, that the arteries, or the
seminal vesicles, were every time, much endan-
gered by this incision; the one, when the parts were much
extended; the other, when they were left, nearly in their
usual position.

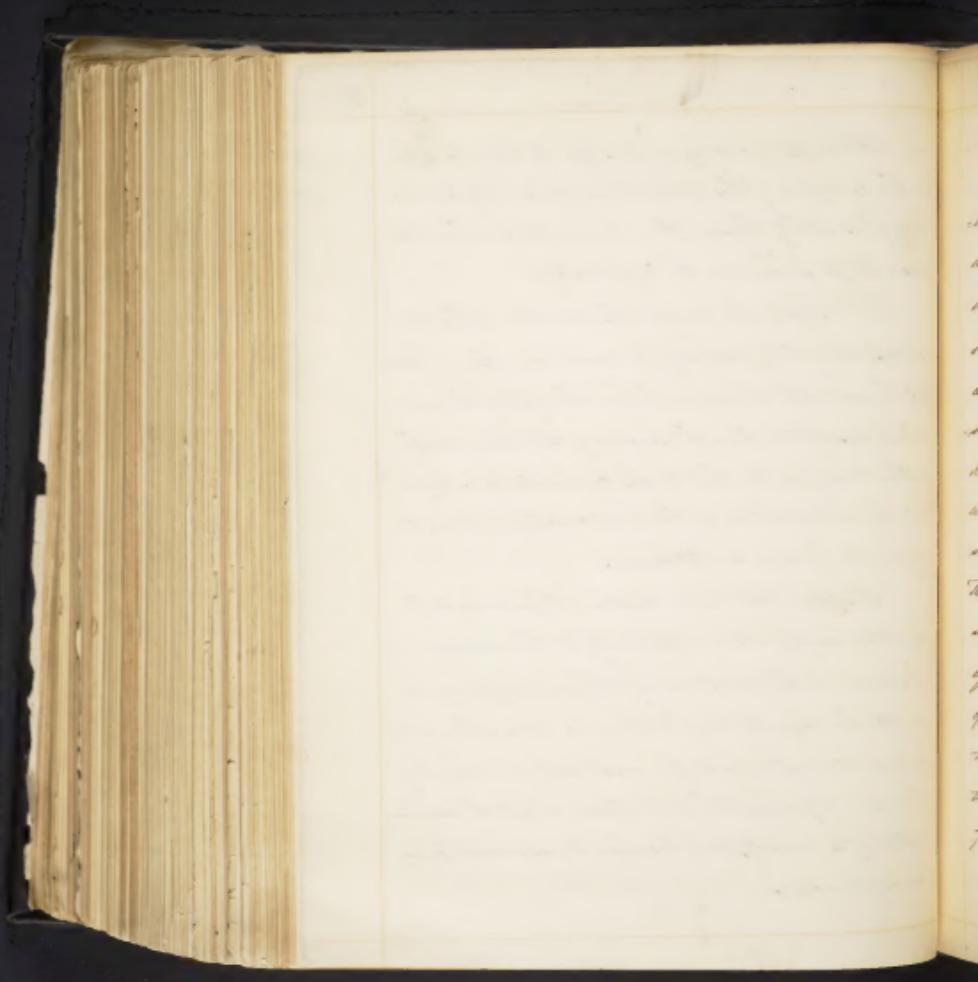
To reward, my reader, how much this
improved method of operating, was esteemed by Mr John
Bell, I quote the following passage from his 'Principles of
Surgery'; having noticed the change he says, 'viz. the in-
cision was in the same place, in the same direction, de-
siding the same parts, it made, no essential distinction,
whether it was performed, as among these distin-
guished operators, by cutting upon the stone, or by intro-



son lithotomists by cutting on the Staff." Mr B. declares that in the propagation of this opinion he is influenced by a conviction of its utility; however then we may think, we must be, sure Mr B. sincere in his impartiality.

Baron who practised this operation with great success, and who by pretending to divine commission, ingested himself with the vulgar, became the object of the most violent persecution from the surgeons of that time; it is familiar to my reader, that to this circumstance is attributed, the introduction of the most cruel operation, the ingenuity of man could devise.

This part of the history teaches a lesson now to be forgotten; improve every opportunity, for the advancement of science, & the amelioration of human suffering, no matter how humble, may be the source, from whence it is derived; and never suffer ourselves to be betrayed by the desire of gain, or the pride of science, into the denunciation of a remedy, only because it was introduced by an empiric.



The introduction of the lateral operation, turns the rest and most valuable part in the history of lithotomy, and health, round again so as to fit for the invention of this operation we are indebted to an physician though, some would though literally endowed by nature for the office of a surgeon, it was not until he had submitted even all to the instructions of Fagon, and Buhler, that he uniformly divided the sacrum. Neither operated with safety to his patients. I believe my name will suffice me in the operation, that poor Dr. Fagon had learned that operation which he practised with such unparalleled success, and which he so skilfully concealed even from his own friends. Buhler operated very much after the same manner of Dr. Jacques, though with more safety to the patient, and with greater certainty of dividing the prostate gland and

We have thus hastily run over the



ister of lithotome till its first insertion with
cutting, so great is the power of the instrument
but from one party, received the most unqualified
opprobrium, and from the other the most timi-
led condemnation. It is an intimation to you again,
that are the principal accusations made against the
instrument, and how far they are confirmed by the ex-
perience, & some of the best surgeons.

Mr. Bell says, I sometimes, &c. that
the surgeon, deceived by the common description and
equating to cut his incisions larger upon the belief of
the staff, goes deep into the hollow of the pelvis and goes
a few inches beyond the rectum in staying, following then over
the uterus, and anxious to be relieved from the difficulty
in some, so ignorant believe that he must sometimes
have cut the rectum, and believing this, it is a dan-
gerous thrust in his grasp; sometimes the surgeon, ha-
ving felt the staff and distinguished the circumference
of the rectum, and turned up the high, to cut out

"A
R
T
I
C
L
E
S
O
N
S
63

80

卷之三

224

卷之三

"He passed with so much labour a band about his hand,
wound it, and having failed to disect the muscle
naked, before making this incision the fibres of the
levator ani muscle close upon the small artery which he
had made in it and thus after feeling distinctly the
pulse of the staff he lanced it again and disengaged
itself between the gladder and rectum.

It is very curious that an usage for a moment
or it suffices, by such reasoning to convince of
the imp. propriety of the use of the gorget. Mr Bell
has in his paragraphs selected these arguments to
only varying the former edge, and concides the
chapter as if he thought he had treated the
subject fairly; in our opinion his arguments
would apply with equal force against the knife.

Another argument urged against the use
of the former instrument, is that it tears the
membranous portion of the antra into folds before
and is in that way thrown out of the groove of the



staff, and by the continued efforts of the surgeon is forced below the bladder and his rectum. This operation has some force when urged against the old gorget, but is idle when directed against the improved one which I shall presently mention.

Third objection is that the evader, the bladder is very much endangered from the vessels contracting on the edge of instrument or from the gorget being thrust so far backward. We hope to be able in the sequel to point out the manner in which this may be avoided.

In the operation as performed by the best surgeons in this country, the following instruments are used. a scalpel, a sharp pointed bistoury or gorget of a peculiar construction invented by our illustrious countryman Dr. May, for its blade can be removed from the handle and consequently sharpened to its extreme point, which though very desirable was unattainable when the blade



and each were composed of the same piece of metal; the other instruments are nearly the same as those used by all surgeons in this operation. It must be apparent that there can be no more folding of the wire than by the edge of a grating thus constructed, than by any other cutting instrument; therefore that objection is removed.

It may be indulged in so doing; I will now endeavor to describe the manner of operating. The patient is placed on a narrow dining table, with the leaves turned down, and covered with blankets. The surgeon then introduces the staff, and afterwards secures the patient's hands and foot-filters in the following manner; a moore is passed round the wrist, and the patient is then made to grasp the soles of his feet with the staff in his hands, while the hands and feet are thus



applied to each other. The surgeon secures them by sutured turns of the bandage over the wrists and ankles, the patient thus secured is then led to careful attendants who are directed to place his hands in their mitts, and immediately separate the garters on each other support them nearly in a perpendicular direction by applying the palms of their hands under the sides of the feet of the patient. The surgeon having seated himself takes his scalpel and makes an incision from a point opposite the ball of the metatarsia to a point midway between the nose and tibiae on the left side he continues his dissection down to the muscular portion of the metatarsia, always freely dividing the transversalis and transversalis alterans muscles of the perineum; with the sharp pointed bistery he then divides the mucous membrane portion of the metatarsia for half an inch or more



by cutting from the prostate to the bulb; he then takes the gozett pieces to break in "goures" of the staff, which he takes from the apistole and depressing the handle, balances the instruments on each other, and the gozett two or three times backward and forward in the proue of the staff, satisfies himself that it is safely in the gutter of the staff, then with one steady and continued movement pushes the gozett into the bladder through the prostate, the surgeon should be particular to depress the handle as he moves the gozett forward so as to keep it in the aye of the pelvis. If the surgeon use no violence in urging the gozett forward, and if he be careful to avoid attempting its introduction at a full bladder the patient is bearing down; there is little danger of sounding the fundus of the bladder. The surgeon withdraws the gozett as soon as the gozett



of urine unassisted to enter into the bladder, and introduces the index finger of the left hand into the stone and withdraws the staff; keeping his finger in the bladder, he introduces a small piece of forceps along the finger with the latter shut, and holds his finger and taking one handle of the forceps in each hand, holds a the stone (if it be) in contact with its long diameter and gradually extracting it in this manner, if the gorge is stoned, so that the direction of the axis of the石 is to be repeated until all the stones are removed. Should there happen to be more than one, the bladder should be then cleansed from any fragments, and a cloth of cloth, well貫通, to be in it, by injecting some very full strained beer water, previously prepared; all of which, in consequence, should be secured without delay; as soon as the hemorrhage has ceased, a catheter



is to be introduced into the bladder, the way to carry off the urine. the patient is then undressed put to bed, with his thighs ligtly bound to each other, and laid on his left side.

As in every concern in human life so in this operation, much depends on attention to what are generally called trifles: it is not sufficient that the surgeon merely succeeds to ensure success; he must attend to the patient's every treatment of his patient; for some weeks (if he be fortunate) he must be kept on a strict diet, and directed to drink freely of the saline waters or of the common ^{mineral} waters of the ships; these seem to lessen the irritation of the bladder and prepare the patient better to undergo the pain of the operation. On the day previous to the operation, Dr. Phizel directs a small purgative to be taken; and on the day it is performed, several hours previous to it he pres-



an enema to empty the rectum. The patient ought to take no solid food after the operation. It is difficult to have the patient vomit the day previous to the operation, as all irritations have a slight air to be avoided at this time; Dr. Rush has recommended that a pill containing about 3 or 4 grains of opium be introduced into the bowels about two hours before you mean to operate; as, however, this is the only you can use because it is very easily retained and insipidable in the way; after the operation it becomes the surgeon to be particularly on the look out and to prevent the occurrence of constipation. Now be the strictest antiphlogistic treatment and regimen; it is to Dr. Rush's unceasing attention to every particular, that he remains so indebted for the extraordinary success which has attended him during a long life of useful and toil.



The instruments should also receive the attention of the surgeon, he should, not use the same goget twice, without having it sharpened; he should file the beat of this instrument to the groove of the staff which he intends to use, previous to the operation. That is disadvantageous to a surgeon who uses twice during the operation. Such carelessness seems almost carelessness, but experience, however, are sometimes neglected to the hazard of the patient's life and the disgrace of the surgeon. If the surgeon has determined to, or, given the intent operation, it seems to me both from reasoning and the success which has attended the use of the instrument, that the goget should be preferred to the knife; we are surely persuaded that if the surgeon fails the preparatory duties required of him, and gives the goget a trial, he will never regret it, on the contrary he will prefer it to any.

the instrument.

To continuation of the subject, is
the use of this instrument as well as a
number of the medical men in that city
of Leipsig, Hanover, has operated more than
five times successfully with success and
no doubt that similar success has attended the
practice of Dr. Chiswick.

High Operation. Since the greater part of my
time was to pass a gentleman had the time
left to tend me. Captain, history of the high op-
eration, the removal of a wheel, I am free to say
I have made me a concert to that method
of operating. I wish my limits would permit
me to make as many quotations from his
work as I should feel inclined to do. I do not
desire of introducing enough to justify me
in the eyes of my reader, for my establishment
I may truly call it for, though I possess, to

100
101
102

103
104
105

106

107
108
109

110
111
112

113
114
115

116
117
118

119
120
121

considered it as very impracticable & gave up
publication very reluctantly, to its performance
confining it in most cases to females.

I will give my reader Mr. Capus's
description of the operation which is as follows:
A staff is introduced into the bladder. An inci-
sion is made through the integument of the po-
rius and a small incision into the mem-
brane on part of the urethra a director is in-
duced into the bladder upon the staff the
staff is withdrawn; the sounds. director is intro-
duced up to the director into the bladder the
director is now withdrawn; the sounds. di-
rector is held by an assistant. An incision is
then made, three or four inches in length
through the integuments of the abdomen.

The trocar. bistouri is passed through the linea
alba close to the posterior part of the pubis.
The concealed blade is exposed by means of

He
64
11
13
15
17
19
21
23
25
27
29
31
33
35
37
39
41
43
45
47
49
51
53
55
57
59
61
63
65
67
69
71
73
75
77
79
81
83
85
87
89
91
93
95
97
99
101
103
105
107
109
111
113
115
117
119
121
123
125
127
129
131
133
135
137
139
141
143
145
147
149
151
153
155
157
159
161
163
165
167
169
171
173
175
177
179
181
183
185
187
189
191
193
195
197
199
201
203
205
207
209
211
213
215
217
219
221
223
225
227
229
231
233
235
237
239
241
243
245
247
249
251
253
255
257
259
261
263
265
267
269
271
273
275
277
279
281
283
285
287
289
291
293
295
297
299
301
303
305
307
309
311
313
315
317
319
321
323
325
327
329
331
333
335
337
339
341
343
345
347
349
351
353
355
357
359
361
363
365
367
369
371
373
375
377
379
381
383
385
387
389
391
393
395
397
399
401
403
405
407
409
411
413
415
417
419
421
423
425
427
429
431
433
435
437
439
441
443
445
447
449
451
453
455
457
459
461
463
465
467
469
471
473
475
477
479
481
483
485
487
489
491
493
495
497
499
501
503
505
507
509
511
513
515
517
519
521
523
525
527
529
531
533
535
537
539
541
543
545
547
549
551
553
555
557
559
561
563
565
567
569
571
573
575
577
579
581
583
585
587
589
591
593
595
597
599
601
603
605
607
609
611
613
615
617
619
621
623
625
627
629
631
633
635
637
639
641
643
645
647
649
651
653
655
657
659
661
663
665
667
669
671
673
675
677
679
681
683
685
687
689
691
693
695
697
699
701
703
705
707
709
711
713
715
717
719
721
723
725
727
729
731
733
735
737
739
741
743
745
747
749
751
753
755
757
759
761
763
765
767
769
771
773
775
777
779
781
783
785
787
789
791
793
795
797
799
801
803
805
807
809
811
813
815
817
819
821
823
825
827
829
831
833
835
837
839
841
843
845
847
849
851
853
855
857
859
861
863
865
867
869
871
873
875
877
879
881
883
885
887
889
891
893
895
897
899
901
903
905
907
909
911
913
915
917
919
921
923
925
927
929
931
933
935
937
939
941
943
945
947
949
951
953
955
957
959
961
963
965
967
969
971
973
975
977
979
981
983
985
987
989
991
993
995
997
999
1001
1003
1005
1007
1009
1011
1013
1015
1017
1019
1021
1023
1025
1027
1029
1031
1033
1035
1037
1039
1041
1043
1045
1047
1049
1051
1053
1055
1057
1059
1061
1063
1065
1067
1069
1071
1073
1075
1077
1079
1081
1083
1085
1087
1089
1091
1093
1095
1097
1099
1101
1103
1105
1107
1109
1111
1113
1115
1117
1119
1121
1123
1125
1127
1129
1131
1133
1135
1137
1139
1141
1143
1145
1147
1149
1151
1153
1155
1157
1159
1161
1163
1165
1167
1169
1171
1173
1175
1177
1179
1181
1183
1185
1187
1189
1191
1193
1195
1197
1199
1201
1203
1205
1207
1209
1211
1213
1215
1217
1219
1221
1223
1225
1227
1229
1231
1233
1235
1237
1239
1241
1243
1245
1247
1249
1251
1253
1255
1257
1259
1261
1263
1265
1267
1269
1271
1273
1275
1277
1279
1281
1283
1285
1287
1289
1291
1293
1295
1297
1299
1301
1303
1305
1307
1309
1311
1313
1315
1317
1319
1321
1323
1325
1327
1329
1331
1333
1335
1337
1339
1341
1343
1345
1347
1349
1351
1353
1355
1357
1359
1361
1363
1365
1367
1369
1371
1373
1375
1377
1379
1381
1383
1385
1387
1389
1391
1393
1395
1397
1399
1401
1403
1405
1407
1409
1411
1413
1415
1417
1419
1421
1423
1425
1427
1429
1431
1433
1435
1437
1439
1441
1443
1445
1447
1449
1451
1453
1455
1457
1459
1461
1463
1465
1467
1469
1471
1473
1475
1477
1479
1481
1483
1485
1487
1489
1491
1493
1495
1497
1499
1501
1503
1505
1507
1509
1511
1513
1515
1517
1519
1521
1523
1525
1527
1529
1531
1533
1535
1537
1539
1541
1543
1545
1547
1549
1551
1553
1555
1557
1559
1561
1563
1565
1567
1569
1571
1573
1575
1577
1579
1581
1583
1585
1587
1589
1591
1593
1595
1597
1599
1601
1603
1605
1607
1609
1611
1613
1615
1617
1619
1621
1623
1625
1627
1629
1631
1633
1635
1637
1639
1641
1643
1645
1647
1649
1651
1653
1655
1657
1659
1661
1663
1665
1667
1669
1671
1673
1675
1677
1679
1681
1683
1685
1687
1689
1691
1693
1695
1697
1699
1701
1703
1705
1707
1709
1711
1713
1715
1717
1719
1721
1723
1725
1727
1729
1731
1733
1735
1737
1739
1741
1743
1745
1747
1749
1751
1753
1755
1757
1759
1761
1763
1765
1767
1769
1771
1773
1775
1777
1779
1781
1783
1785
1787
1789
1791
1793
1795
1797
1799
1801
1803
1805
1807
1809
1811
1813
1815
1817
1819
1821
1823
1825
1827
1829
1831
1833
1835
1837
1839
1841
1843
1845
1847
1849
1851
1853
1855
1857
1859
1861
1863
1865
1867
1869
1871
1873
1875
1877
1879
1881
1883
1885
1887
1889
1891
1893
1895
1897
1899
1901
1903
1905
1907
1909
1911
1913
1915
1917
1919
1921
1923
1925
1927
1929
1931
1933
1935
1937
1939
1941
1943
1945
1947
1949
1951
1953
1955
1957
1959
1961
1963
1965
1967
1969
1971
1973
1975
1977
1979
1981
1983
1985
1987
1989
1991
1993
1995
1997
1999
2001
2003
2005
2007
2009
2011
2013
2015
2017
2019
2021
2023
2025
2027
2029
2031
2033
2035
2037
2039
2041
2043
2045
2047
2049
2051
2053
2055
2057
2059
2061
2063
2065
2067
2069
2071
2073
2075
2077
2079
2081
2083
2085
2087
2089
2091
2093
2095
2097
2099
2101
2103
2105
2107
2109
2111
2113
2115
2117
2119
2121
2123
2125
2127
2129
2131
2133
2135
2137
2139
2141
2143
2145
2147
2149
2151
2153
2155
2157
2159
2161
2163
2165
2167
2169
2171
2173
2175
2177
2179
2181
2183
2185
2187
2189
2191
2193
2195
2197
2199
2201
2203
2205
2207
2209
2211
2213
2215
2217
2219
2221
2223
2225
2227
2229
2231
2233
2235
2237
2239
2241
2243
2245
2247
2249
2251
2253
2255
2257
2259
2261
2263
2265
2267
2269
2271
2273
2275
2277
2279
2281
2283
2285
2287
2289
2291
2293
2295
2297
2299
2301
2303
2305
2307
2309
2311
2313
2315
2317
2319
2321
2323
2325
2327
2329
2331
2333
2335
2337
2339
2341
2343
2345
2347
2349
2351
2353
2355
2357
2359
2361
2363
2365
2367
2369
2371
2373
2375
2377
2379
2381
2383
2385
2387
2389
2391
2393
2395
2397
2399
2401
2403
2405
2407
2409
2411
2413
2415
2417
2419
2421
2423
2425
2427
2429
2431
2433
2435
2437
2439
2441
2443
2445
2447
2449
2451
2453
2455
2457
2459
2461
2463
2465
2467
2469
2471
2473
2475
2477
2479
2481
2483
2485
2487
2489
2491
2493
2495
2497
2499
2501
2503
2505
2507
2509
2511
2513
2515
2517
2519
2521
2523
2525
2527
2529
2531
2533
2535
2537
2539
2541
2543
2545
2547
2549
2551
2553
2555
2557
2559
2561
2563
2565
2567
2569
2571
2573
2575
2577
2579
2581
2583
2585
2587
2589
2591
2593
2595
2597
2599
2601
2603
2605
2607
2609
2611
2613
2615
2617
2619
2621
2623
2625
2627
2629
2631
2633
2635
2637
2639
2641
2643
2645
2647
2649
2651
2653
2655
2657
2659
2661
2663
2665
2667
2669
2671
2673
2675
2677
2679
2681
2683
2685
2687
2689
2691
2693
2695
2697
2699
2701
2703
2705
2707
2709
2711
2713
2715
2717
2719
2721
2723
2725
2727
2729
2731
2733
2735
2737
2739
2741
2743
2745
2747
2749
2751
2753
2755
2757
2759
2761
2763
2765
2767
2769
2771
2773
2775
2777
2779
2781
2783
2785
2787
2789
2791
2793
2795
2797
2799
2801
2803
2805
2807
2809
2811
2813
2815
2817
2819
2821
2823
2825
2827
2829
2831
2833
2835
2837
2839
2841
2843
2845
2847
2849
2851
2853
2855
2857
2859
2861
2863
2865
2867
2869
2871
2873
2875
2877
2879
2881
2883
2885
2887
2889
2891
2893
2895
2897
2899
2901
2903
2905
2907
2909
2911
2913
2915
2917
2919
2921
2923
2925
2927
2929
2931
2933
2935
2937
2939
2941
2943
2945
2947
2949
2951
2953
2955
2957
2959
2961
2963
2965
2967
2969
2971
2973
2975
2977
2979
2981
2983
2985
2987
2989
2991
2993
2995
2997
2999
3001
3003
3005
3007
3009
3011
3013
3015
3017
3019
3021
3023
3025
3027
3029
3031
3033
3035
3037
3039
3041
3043
3045
3047
3049
3051
3053
3055
3057
3059
3061
3063
3065
3067
3069
3071
3073
3075
3077
3079
3081
3083
3085
3087
3089
3091
3093
3095
3097
3099
3101
3103
3105
3107
3109
3111
3113
3115
3117
3119
3121
3123
3125
3127
3129
3131
3133
3135
3137
3139
3141
3143
3145
3147
3149
3151
3153
3155
3157
3159
3161
3163
3165
3167
3169
3171
3173
3175
3177
3179
3181
3183
3185
3187
3189
3191
3193
3195
3197
3199
3201
3203
3205
3207
3209
3211
3213
3215
3217
3219
3221
3223
3225
3227
3229
3231
3233
3235
3237
3239
3241
3243
3245
3247
3249
3251
3253
3255
3257
3259
3261
3263
3265
3267
3269
3271
3273
3275
3277
3279
3281
3283
3285
3287
3289
3291
3293
3295
3297
3299
3301
3303
3305
3307
3309
3311
3313
3315
3317
3319
3321
3323
3325
3327
3329
3331
3333
3335
3337
3339
3341
3343
3345
3347
3349
3351
3353
3355
3357
3359
3361
3363
3365
3367
3369
3371
3373
3375
3377
3379
3381
3383
3385
3387
3389
3391
3393
3395
3397
3399
3401
3403
3405
3407
3409
3411
3413
3415
3417
3419
3421
3423
3425
3427
3429
3431
3433
3435
3437
3439
3441
3443
3445
3447
3449
3451
3453
3455
3457
3459
3461
3463
3465
3467
3469
3471
3473
3475
3477
3479
3481
3483
3485
3487
3489
3491
3493
3495
3497
3499
3501
3503
3505
3507
3509
3511
3513
3515
3517
3519
3521
3523
3525
3527
3529
3531
3533
3535
3537
3539
3541
3543
3545
3547
3549
3551
3553
3555
3557
3559
3561
3563
3565
3567
3569
3571
3573
3575
3577
3579
3581
3583
3585
3587
3589
3591
3593
3595
3597
3599
3601
3603
3605
3607
3609
3611
3613
3615
3617
3619
3621
3623
3625
3627
3629
3631
3633
3635
3637
3639
3641
3643
3645
3647
3649
3651
3653
3655
3657
3659
3661
3663
3665
3667
3669
3671
3673
3675
3677
3679
3681
3683
3685
3687
3689
3691
3693
3695
3697
3699
3701
3703
3705
3707
3709
3711
3713
3715
3717
3719
3721
3723
3725
3727
3729
3731
3733
3735
3737
3739
3741
3743
3745
3747
3749
3751
3753
3755
3757
3759
3761
3763
3765
3767
3769
3771
3773
3775
3777
3779
3781
3783
3785
3787
3789
3791
3793
3795
3797
3799
3801
3803
3805
3807
3809
3811
3813
3815
3817
3819
3821
3823
3825
3827
3829
3831
3833
3835
3837
3839
3841
3843
3845
3847
3849
3851
3853
3855
3857
3859
3861
3863
3865
3867
3869
3871
3873
3875
3877
3879
3881
3883
3885
3887
3889
3891
3893
3895
3897
3899
3901
3903
3905
3907
3909
3911
3913
3915
3917
3919
3921
3923
3925
3927
3929
3931
3933
3935
3937
3939
3941
3943
3945
3947
3949
3951
3953
3955
3957
3959
3961
3963
3965
3967
3969
3971
3973
3975
3977
3979
3981
3983
3985
3987
3989
3991
3993
3995
3997
3999
4001
4003
4005
4007
4009
4011
4013
4015
4017
4019
4021
4023
4025
4027
4029
4031
4033
4035
4037
4039
4041
4043
4045
4047
4049
4051
4053
4055
4057
4059
4061
4063
4065
4067
4069
4071
4073
4075
4077
4079
4081
4083
4085
4087
4089
4091
4093
4095
4097
4099
4101
4103
4105
4107
4109
4111
4113
4115
4117
4119
4121
4123
4125
4127
4129
4131
4133
4135
4137
4139
4141
4143
4145
4147
4149
4151
4153
4155
4157
4159
4161
4163
4165
4167
4169
4171
4173
4175
4177
4179
4181
4183
4185
4187
4189
4191
4193
4195
4197
4199
4201
4203
4205
4207
4209
4211
4213
4215
4217
4219
4221
4223
4225
4227
4229
4231
4233
4235
4237
4239
4241
4243
4245
4247
4249
4251
4253
4255
4257
4259
4261
4263
4265
4267
4269
4271
4273
4275
4277
4279
4281
4283
4285
4287
4289
4291
4293
4295
4297
4299
4301
4303
4305

which the lower, part of the linea allia is di-
vided. - if no epiglottized incision is introduced
through the groove which had been made
by the concealed bistouri into the lower
part of the linea allia, and the incision
is continued by means of this instrument.
The operator takes the sonde de-dried
from the assistant with his right hand
and pushes it forward, by which means
he elevates the bladder above the rectum.
The assistant, now holds the sonde de-dried
and the surgeon with his right hand, intro-
duces the stilet (which is contained in the
cannula of the sonde de-dried), through the
superior and anterior, part of the bladder;
he takes hold of the end of the stilet with
his left hand, and takes a hooked pointed
bistouri along the groove, which is in the
anterior, part of the stilet, and makes an



incision in the superior anterior part of the bladder. He places the index finger of his left hand into the bladder, by means of which he supports it. The stile is withdrawn from the caruncula of the prostate, so as to be now suspended held by an assistant; the operator introduces the suspensor of the bladder, which is held by an assistant. The stone is now to be withdrawn with the finger and thumb, which if small, is done with great ease. If the bladder is large a finger is introduced per rectum, by which the bladder is elevated and the stone more readily found. If the stone should be in an excretion, and the bladder is not of a very large size, it may be discovered with the finger, by means of which the surgeon will know whether a stone, or what kind of



forceps is indicated. When the stone has been extracted, Dr. Loubrelle introduces a silver wire through the canula of the sonde de-dard and passes it through the wound, made in the linea alba; this is held while the sonde de-dard is withdrawn after the glass catheter is now passed into the bladder, through the wound in the membranous part of the urethra by means of this wire. The wire is now withdrawn, the catheter is confined in this situation, by means of tapes passed round the thighs and pelvis of the patient; a bladder is tied to it, to receive the urine". M'Cramp says this is the method practised and that it is executed in a very short time, yet he thinks "if the point of the catheter were introduced into the sonde de-dard, the sonde de-dard might be brought through the openings in the linea alba, and by this means the catheter might be conducted



ed into the Bladder with the greatest facility; or the catheter & the stilett to be made of flexible gum, which in place of silver, would contain the stilett, and this might remain in the Bladder, and the less or part might be cut off thus answering every purpose?

Method of dressing the patient

A piece of ~~soft~~ ^{thin} Linen, half an inch wide and six or eight inches long, is to be introduced by means of a pair of forceps, into the Bladder; the edges of the wound are to be covered with lint, to prevent the urine excoriating the parts, the liner is to be allowed to approach the pubis on either side, and by this means the portion of the urine which is not carried away by the catheter will be carried off by this liner.

Lint and light dressings are to be applied to the wound, and a bandage passed round the

6

10

at

a

the

the

the

as

40

the

the

the

by

the

the

the

the

the

the

the

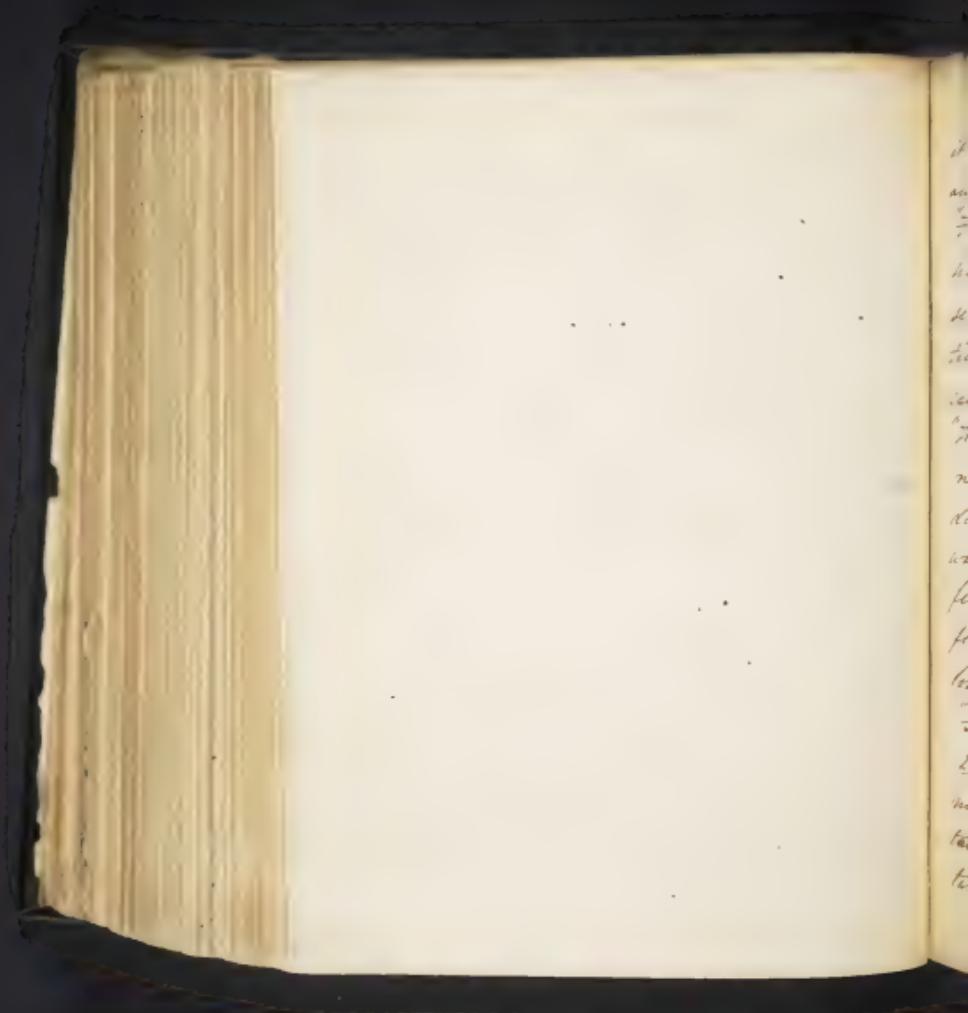
the

the

abdomen."

" Your care is to be taken that the catheter is kept open; a sild should be occasionally passed. Much attention should be paid to the subsequent dressings. Usually on the third day the urine may be taken from the bladder, as by that time the greatest part of the urine will pass by the catheter. By this time the wound usually suppurates. Adhesive plasters may be applied, in order that the divided parts may be brought into contact. In the course of twenty years' practice, I have invariably found that the after-treatment of the patient is not of less importance to his life than the operation itself."

Having furnished my reader with Mr. Parry's description of this operation it becomes me next to bring forward some of the reasons for his preference of it over the one most usually adopted in this country. The instances in which



it has proved successful are very numerous and of a most unfavourable kind.

"Fire Come," says our author, performed one hundred operations; but it must be observed he did not perform the high operation, if there was any chance ^{danger} by the lateral method. Nineteen died."

"He operated on forty one males and fifty nine females; ten men and nine females died. It will be seen that Fire Come was more successful in his operation on females than males, though some of the former were hopeless cases, such as the following, published by M. Baschal:

"Fire Come operated in 1780 on the widow Bonne, aged fifty eight years. She had had many children. In consequence of the incrustation of the stone, she could not walk or take the least exercise; in this deplorable



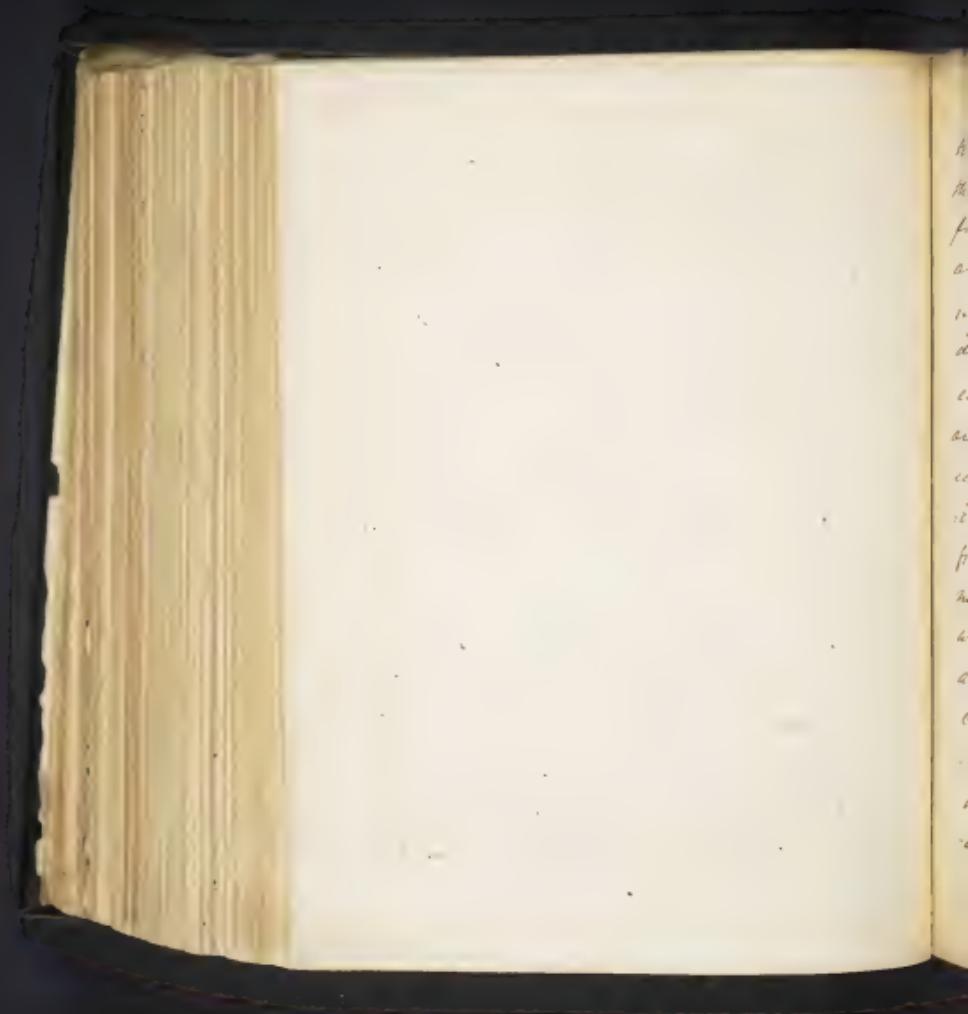
State she was brought to Paris on a bed plated
in a cart. Mme Céne attempted to save her;
the sound was stopped at the neck of the blad-
der by the stone. Mme Céne performed the
high Operation: the stone adhered to the blad-
der; it was of an irregular form, and its tubu-
larities adhered to and were incarcerated in
various parts of the bladder; this rendered the
introduction of the forceps exceedingly diffi-
cult; however Mme Céne succeeded by the
use of his forceps. The stone was light
weighing seven ounces and a half, but from
its size it had the appearance of a stone of
twelve ounces. This female before the op-
eration had incontinence of urine.

Notwithstanding the enormous size of the
stone, and the consequent large incision of
the body of the bladder, she recovered in the space
of five weeks, and could retain her urine before



she left Five Cimes infirmary."

Our author quotes another case from M. Basithac's M^{me} Coutan of Toulon, aged eighteen had from her birth great pain in making water. In the spring of 1784 her father brought her to Paris. She was surrounded by the surgeons of the Hôpital. Duret who found the stone. Fortunately for the girl, says M. Basithac, I operated by the Haut Appareil, for it would have been impossible to extract the stone by the neck of the bladder, without destroying the internal coat. The stone weighed five ounces, was round, unequal, and tuberculated; it adhered, and was incarcerated in the internal coats of the bladder. After having made the incision, I in vain endeavoured to introduce the blades of the forceps. Having examined with attention the cause of



this failure, I observed that the tubercles of the stone were lodged in the cells which had formed in the bladder, to which the stone adhered; I broke away this connection with my nails. Having been so fortunate as to detach the stone from the bladder with care introduced the blades of my forceps, and laid hold of the stone, which I extracted with great facility. I now placed a flexible green catheter in the urethra. A great part of the urine passed by the wound; but it must be recollect'd, that this young lady was afflicted with the stone from her birth; and that the bladder in consequence of its connection with the stone was of an irregular shape; part of the internal coat of the bladder slough'd, which obstructed the passage of the urine through the tube of the catheter. I injected tepid water into the



bladder; and I sometimes placed her in an upright position and made her walk which had the desire effect. The parts cicatrized and the young lady received a complete cure. She had no inconvenience or pain.

I hope that the quotations which I have made, will not be considered too numerous, if it were possible I should like to lay before my reader many more facts brought forward by our author in support of this manner of operating. I shall conclude by quoting from the work the reasons for preferring it; and also the cases in which it would be improper to attempt it.

He prefers it, 1st Because it is generally performed in less time than the lateral operation.

2nd There is less pain. 3rd There is no fear of a fatal hemorrhage.

4th There is no division of the prostate, nor of the inferior part of the bladder; nor is there any danger of wounding the rectum.

5th The stone if a certain size cannot be extracted by the lateral, but may be extracted by this method.

6th A small stone is more readily discovered by this method than by the lateral.

7th If the stone breaks, the particles can be extracted with more certainty than in the lateral operation.

8th If the stone is concealed in a cyst, the cyst can be destroyed and the stone extracted as is proved in Sir E. Home's case; and if the stone should be situated above the prostate, or in any cavity which is occasionally found in the bladder, it can be with greater ease discovered and extracted.



There is also no danger of including part of the bladder with the stone, in endeavouring to extract it, nor any danger of a fistulous opening after the operation.

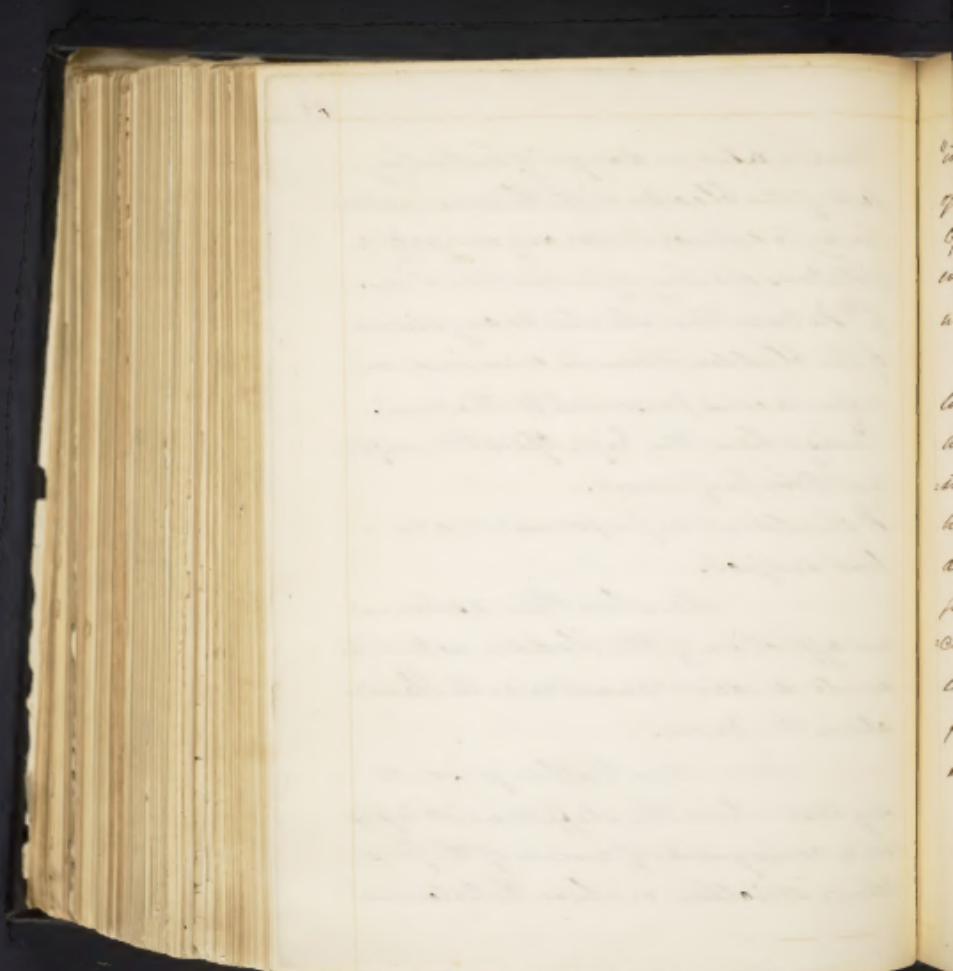
If in case there should be any disease of the bladder, it can be examined and proper means prescribed for the cure.

Cases where the high Operation ought not to be performed.

It should not be performed on a Constituted subject.

Now where there is, scirrhous, nor affection of the bladder; so that the sonde de-dard cannot raise the bladder above the pubis."

Our Author goes on to say "that where the staff cannot be passed in consequence of disease of the prostate or stricture, or where the Calculus"



"is of a certain magnitude, there is no choice of the mode of operation. Either the right operation must be performed, or the patient is doomed to linger out a life of wretchedness."

We have made many and long extracts from Mr Carpius's work; we should be sorry if we are understood as embracing all proofs by which he supports his preference. We would advise everyone to read the work, and judge for themselves; and we are inclined to think, if they do, they will either be made proselytes or have their faith in the lateral operation considerably shaken.

